## BEST AVA!LABLE COPY Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

19713883

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |   |               |   |                      |                  |          | SMALL ENTITY        |                        |         | OTHER               |                        |
|---|--|---|---------------|---|----------------------|------------------|----------|---------------------|------------------------|---------|---------------------|------------------------|
| TOTAL CLAIMS  |  |   | (Column 1)    |   | (Column 2)           |                  | 1 1      | TYPE                |                        | OR      | SMALL ENTITY        |                        |
| TOTAL OLAIMS  |  |   | 65            |   | <u> </u>             |                  |          | RATE                | FEE                    |         | RATE                | FEE                    |
| FOR   |  |   | NUMBER FILED  |   | NUMBER EXTRA         |                  |          | BASIC FEE           | 355.00                 | OR      | BASIC FEE           | 710.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | -ر minus 20=  |   | • 45                 |                  |          | X\$ 9=              |                        | OR      | X\$18=              | 810                    |
| INDEPENDENT CLAIMS  |  |   | 6 - minus 3 = |   | 3                    |                  |          | X40=                |                        | OR      | X80=                | 240                    |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |               |   |                      |                  |          | +135=               |                        | OR      | +270=               |                        |
| * If the difference in column 1 is less than zero, enter  |  |   |               |   | "0" in c             | olumn 2          | 1        | TOTAL               |                        | OR      | TOTAL               | 1760                   |
| ฏ∭ ე/CKAIMS AS AMENDED - PART II  |  |   |               |   |                      |                  |          | ·                   |                        | •       | OTHER               |                        |
|   | 2H-J///  | (Column 1)                                |               | (Column 2) (Column 3)                   |                      |                  |          | SMALL               | ENTITY                 | OR      | SMALL               | ENTITY                 |
| AMENDMENT A   |  | REMAINING<br>AFTER<br>AMENDMENT           |               | NUM<br>PREVIO<br>PAID                   | BER<br>DUSLY<br>FOR  | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | . 30                                      | Minus         | 4                                       | 25                   | =                |          | X\$ 9=              |                        | OR      | X\$18=              |                        |
|   | Independent                                    | · O                                       | Minus         | PENIDENT                                | CIAIN                | =                |          | X40=                |                        | OR      | X80=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |               |   |                      |                  |          | +135=               |                        | OR      | +270=               |                        |
|   |  |   |               |   |                      |                  |          | TOTAL<br>ADDIT, FEE |                        | OR      | TOTAL<br>ADDIT. FEE |                        |
|   |  | )   |               |   |                      | ADDII. FEE       | -        |                     |                        |         |                     |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | (Colui<br>HIGH<br>NUM<br>PREVIO<br>PAID | IEST<br>BER<br>OUSLY | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus         | **                                      | -                    | =                | 11       | X\$ 9=              |                        | OR      | X\$18=              |                        |
|   | Independent                                    | •   | Minus         | ***                                     |                      | <b>=</b> '       | <u> </u> | X40=                |                        | OR      | X80=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |               |   |                      |                  | ┚┞       |                     |                        | On      |                     |                        |
|   |  |   |               |   |                      |                  | L        | +135=<br>TOTAL      |                        | OR      | +270=               |                        |
|   |  |   |               |   |                      |                  |          |                     |                        | OR      | TOTAL<br>ADDIT. FEE |                        |
|   | ,  |   |               |   |                      |                  |          |                     |                        |         |                     |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGH<br>NUMI<br>PREVIC<br>PAID          | BER<br>DUSLY         | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | •   | Minus         | ••                                      |                      | =                |          | X\$ 9=              |                        | OR      | X\$18=              |                        |
|   | Independent                                    | •   | Minus         | ***                                     |                      | =                |          | X40=                |                        | OR      | X80=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |               |   |                      |                  |          |                     |                        | - 1     |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |   |               |   |                      |                  |          |                     |                        | OR      | +270=<br>TOTAL      |                        |
| ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |   |               |   |                      |                  |          |                     |                        | OR ,    | ADDIT. FEE          |                        |
|   |  | ber Previously Pak                        |               |   |                      |                  | er four  | nd in the app       | ropriate box           | in coli | umn 1.              |                        |